	DMENED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY ltides Reference to PCT International Applications)			
				#3089
•	As a below named inventor, I hereby declare that:			
	My residence, post office address and citizenship are as stated below next to my name,			
	I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:			
Life of the state	on the invention character.	Training Apparatus		
	the specification of which (check only one item below):			
	is attached hereto.			
	was filed as United States application			
	Serial No.			
	on,			
	and was amended			
	on (if applicable).			
	was filed as PCT international application			
	Number			
# 	on,			
ļ. Pil	and was amended under PCT Article 19			
7) 7)	on (if applicable).			
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	I hereby state that I have reviewed and understand the contents of the above-identified specification, including			
	the claims, as amended by any amendment referred to above.			
	I acknowlege the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).			
		·	ates Code. §119 of any fore	ign application(s)
	I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s)			
	for patent or inventor's certificate or any PCT international application(s) designating at least one country other			
	than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:			
		DI AND ANY DRIGHTY OF AIMS HADED 2	EU C C 110.	
PRIOF		S) AND ANY PRIORITY CLAIMS UNDER 35		PRIORITY CLAIMED
	COUNTRY (If PCT, indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	UNDER 35 USC 119
				YES NO
				YES NO
				YES NO
				YES NO
		1		I □ YES □ NO

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